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To: Examiner L. Black
Group Art Unit 2163, USPTO

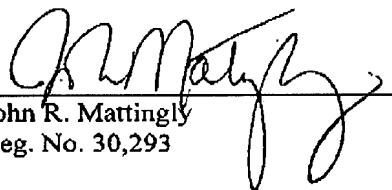
From: Mr. John R. Mattingly
MATTINGLY, STANGER, MALUR & BRUNDIDGE, P.C.

Re: USSN 10/673,609
Attorney Docket No.: ASA-901-02

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following listed documents are being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below:

**Transmittal;
Amendment;
Request for Continued Examination (RCE); and
Credit Card Payment Form in amount of \$790.00
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 John R. Mattingly
 Reg. No. 30,293

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09-28-'07 13:29 FROM-Mattingly, Stanger

703-684-1157

T-571 P002/023 F-249

Form PTO-1083

Patent

In RE application of H. WATANABE et al.

Case Docket No.: ASA-901-02

Serial No.: 10/673,609

Group Art Unit: 2163

Filed: September 30, 2003

Examiner: L. Black

For: A METHOD OF AND A SYSTEM FOR RECOVERING DATA IN AN INFORMATION
PROCESSING SYSTEMAssistant Commissioner for Patents
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Sir:

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Transmitted herewith is an Amendment in the above-identified application.

- Small entity of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
- A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
- No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) Claims Remaining After Amendment	(Col. 2)	(Col. 3) Highest No. Previously Paid For	Present Extra	SMALL ENTITY	OTHER THAN A SMALL ENTITY
Total	* 17	Minus	** 20	= 0	Rate	Rate
Indep.	** 5	Minus	*** 5	= 0	Additional Fee	Additional Fee
<input type="checkbox"/> First presentation of Multiple Dependent Claims						
X 25	\$	X 50	\$			
X 100	\$	X 200	\$			
X 180	\$	X 360	\$			
Total	\$	Total	\$			

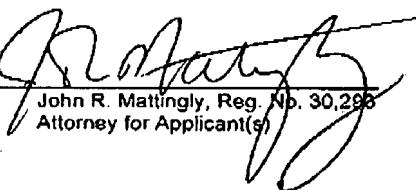
- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in col. 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

- Please charge my Deposit Account No. 50-1417 in the amount of \$ _____.
- A Credit Card Payment Form in the amount of \$ 790.00 is attached for RCE fee.
- The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayments to Deposit Account No. 50-1417.
- Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
- Any patent application processing fees under 37 CFR 1.17.
- Any Extension of Time fees that are necessary, which are hereby requested if necessary.

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By:


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